



Camper Information

Camper Name: _____	MALE /	FEMALE
Street: _____		
City: _____	Province: _____	Postal Code: _____
Name of School: _____	Birthdate: _____ DD - MM - YYYY	

Family Information

Parent / Guardian 1

Full Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Parent / Guardian 2

Full Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Emergency Information (required)

Emergency Contact

Full Name: _____

Relation: _____

Phone: _____

Cell: _____

Family Physician

Full Name: _____

Phone: _____

Office Hours: _____

Camper Health Card: _____

Camp Sessions

(please check each session the camper plans to attend and circle the tiered price you wish to pay)

<u>Session Name</u>	<u>Ages</u>	<u>Dates</u>	<u>Tier 1</u>	<u>Tier 2</u>	<u>Tier 3</u>
TEEN WEEK	12 – 15	July 9 th – 12 th	\$435	\$395	\$360
SPLASH DAY CAMP #1	5 – 13	July 15 th – 19 th	\$175	\$150	\$125
OPEN CIRCLE WEEK	7 – 14	July 21 st – 26 th	\$435	\$395	\$360
ALL GIRLS WEEK GIRLS	7 – 14	July 28 th – Aug. 2 nd	\$435	\$395	\$360
DISCOVERY CAMP	5 – 11	Aug. 7 th – 9 th	\$260	\$230	\$200
SPLASH DAY CAMP #2	5 – 13	Aug. 12 th – 16 th	\$175	\$150	\$125
SPORTS AND ARTS CAMP	7 – 14	Aug. 18 th – 23 th	\$435	\$395	\$360
LEADER IN TRAINING	15 - 17	July 21 st – 26 th **	\$500	\$450	\$370

**** OUR LEADERS IN TRAINING PROGRAM CONSISTS OF A TOTAL OF THREE WEEKS. THE ONE LISTED PLUS TWO ADDITIONAL WEEKS TO BE DETERMINED TOGETHER BY THE LIT AND CAMP DIRECTOR**

Our Tiered Pricing System Explanation

At Lambton Centre it is our mission to provide camping opportunities to all members of our community, regardless of the ability to pay. The tiered system is designed to allow those with the ability to pay the opportunity to do so while also being able to continue offering subsidized rates. The cost of a week of camp includes not only staff wages but also insurance, utilities, food, supplies, maintenance of the property and administration.

The 1st tier of the chart represents an accurate estimate of cost of one week of camp. The 2nd tiered is a partially subsidized rate and the 3rd tier is the fully subsidized rate. It should be noted that the tier that is chosen is anonymous and does not reflect the experience that a child will receive at Lambton Centre.

Should summer camp be financially unsustainable for your family, please call the Office for a bursary application. If granted, the bursary further subsidizes the cost of camp. Bursaries can only be applied to Tier 1 applications and are not offered for SPLASH Day Camps.

T-Shirt Size

This year Lambton Centre will be offering campers the opportunity for a T-Shirt. In order for your child to be guaranteed a certain size, please fill out the form below to indicate the size of shirt for your child. If you have any concerns regarding the fabric of the T-Shirt, please contact the Centre and speak with the Summer Camp Director.

<i>Adult Sizes</i>				
- XL	- L	- M	- S	Other: _____

<i>Youth Sizes</i>				
- XL	- L	- M	- S	Other: _____

Payment Information

Full payment is required at time of registration.

		<i>Camp Costs</i>
Total Camp #1:	_____	
Total Camp #2:	_____	
Total Camp #3:	_____	
SPLASH Bus	_____	
	WEEK 1 WEEK 2	
Sub Total:	_____	
13% HST:	_____	
Total:	_____	

		<i>Payment</i>
Please Check Method of Payment		
Cheque <small>PAYABLE TO LAMBTON CENTRE</small>	Cash	
VISA	MasterCard	
Card #	_____	
exp.	_____	
Cardholder Name:	_____	
Signature:	_____	

Sign up for our E-Mails

Lambton Centre would like to keep in-touch with opportunities and events through out the year. If you are interested in any information realted to any of the following topics please check the box and we will add your email address to our contact list. Should you decide to have your email removed from any of our contact lists we would be glad to do so at your request.

I hereby give consent to Lambton Centre to add my email address(es), listed in Family Information section and to the right, to their email contact list for the purpose of marketing. I acknowledge that I may remove myself from this list at any time by emailing Lambton Centre and indicating so. Personal information will not be given out to those outside of Lambton Centre without your consent.

Additional Information

Please indicate how many years, including this one, your child has attended Lambton Centre Summer Camp: _____

How did you hear about us?

We would like to find out how you heard about Summer Camp at Lambton Centre.

- Brochure
- Radio Ad.
- School Field Trip
- Friend/Family
- Social Media
- Road Sign
- Internet Search
- Our Website
- Other: _____

<p>Please check the types of emails you wish to receive from Lambton Centre.</p> <p>Summer Camp Information (outside of current year's information and as outlined in this registration form)</p> <p>Newsletters</p> <p>Fundraising Events</p> <p>United Church Events</p> <p>Outdoor Education</p> <p>Volunteer Opportunities</p> <p>Additional emails other than the ones listed in Family Information.</p> <p>_____</p> <p>_____</p>

Coupon Code

Have a coupon code? Please enter it here: _____ and fill out additional information below.

REFER A FRIEND COUPON
Friend 1: _____
Friend 2: _____

OUTDOOR ED COUPON
Teacher: _____
Trip Date: _____

OTHER COUPON

Where did you receive coupon?

* Please note, all discounts will be refunded at the end of the camp session to ensure correct information.

Camp Policies, Conditions and Authorities

Lambton Centre provides a safe and nurturing environment for our campers, family and staff. Respect and trust are one of the most important elements of the camp experience. We ask that before your campers arrive at camp, they are aware that they must respect other campers, staff, camp policies, and the camp facility. Lambton Centre reserves the right to remove any camper from the program should their behavior pose a physical or emotional threat to any camper, staff member or the camp property, without refund of registration fees. Lambton Centre is a smoke, alcohol and drug free facility, and use of these substances will result in immediate dismissal from the camp program without refund.

If there is an emergency of a child is missing home more than usual, the Summer Camp Director will contact with the parents/guardians. Campers are not permitted to receive phone calls or visitors.

Lambton Centre’s summer camp program strives to be “gadget free”. Campers are not permitted to bring cell phones, personal computers, iPods or related devices to camp. Gadgets will only be utilized by staff for camp purposes.

Lambton Centre culinary staff offer a wide assortment of meal options that cater to the needs of main stream alternative diets. Should your camper require any unique dietary items, please bring to registration. If you have questions or concerns regarding alternative diets at camp, contact the Summer Camp Director. Lambton Centre is a peanut safe facility, and does not permit campers to bring nut products to camp.

Lambton Centre recognizes the importance of each camper’s unique medical needs. All medications must be submitted to the camp Health Care Provider at the time of registration. No camper will be permitted to carry any personal medications, with the exception of Epipens, Inhalers, or others at the discretion of the Summer Camp Director and Health Care Staff.

By submitting this application, the parents/guardian agree for and on behalf of themselves and the camper that any photograph or video taken of the camper by camp personnel or others authorized by the Camp Director may be used without charge by Lambton Centre for any promotional material; including brochures, slideshows, videos, websites or social media networks; unless a written letter is submitted that states otherwise.

Almost there

All that needs to be done now is to submit this registration form, you can do so by faxing it to 519-786-6686, By emailing it to info@lambtoncentre.com or by mailing it to 6602 Lakeshore Road, Lambton Shores, Ontario N0N 1J7. If you have any troubles or questions regarding the submission of this form, please contact the office at 519-786-5663

I hereby give consent for _____ to attend Lambton Centre and confirm that their health is suitable for camping activities. I authorize Lambton Centre to refer to the above camper to medical authorities on my behalf.	
_____	_____
Parent / Guardian Signature	Date DD - MM - YYYY

Camper Name: _____	Birthdate (DD - MM - YYYY): _____
Camp Session: _____	Family Doctor: _____
Ontario Health Card #: _____	Cabin Colour: _____ (Office use only)
Allergies or Conditions:	
In the three weeks prior to the start of camp, has your child been in contact with any communicable diseases?	

Emergency Information (required again)

<i>Emergency Contact 1</i>
Full Name: _____
Relation: _____
Phone: _____
Cell: _____

<i>Emergency Contact 2</i>
Full Name: _____
Relation: _____
Phone: _____
Cell: _____

Please list all medications / health care products brought to camp:

Medication / Product	Used to treat	Administration Instructions / Details

Please list any relevant health information that LUCC Staff may require to ensure a successful camp experience.

Parent / Guardian Signature _____	Date (DD-MM-YYYY): _____
LUCC Health Care Staff _____	Date (DD-MM-YYYY): _____

I give permission for my camper _____, to utilize the bus transportation provided by Lambton Centre to attend the following:

SPLASH DAY CAMP #1 (July 15th – July 19th 2019)

or

SPLASH DAY CAMP #2 (August 12th – August 16th 2019)

**** Please Note there will be a \$20/Person fee each Camp Week for the Bus ****

<p>My camper will be catching the bus at:</p> <p>And will be dropped off at:</p> <p>My camper will be riding the bus on the following days:</p>	<p>St. Paul’s United Church, PETROLIA (approx. 8:00 AM) 4169 Petrolia Line, Petrolia</p> <p>St. Luke’s United Church, SARNIA (approx. 8:30 AM) 350 Indian Road South, Sarnia</p> <p>St. Luke’s United Church, SARNIA (approx. 4:30 PM)</p> <p>St. Paul’s United Church, PETROLIA (approx. 5:00 PM)</p> <table style="width: 100%; text-align: center; border: none;"> <tr> <td style="width: 20%;">Monday</td> <td style="width: 20%;">Tuesday</td> <td style="width: 20%;">Wednesday</td> <td style="width: 20%;">Thursday</td> <td style="width: 20%;">Friday</td> </tr> <tr> <td>AM PM</td> <td>AM PM</td> <td>AM PM</td> <td>AM PM</td> <td>AM PM</td> </tr> </table>	Monday	Tuesday	Wednesday	Thursday	Friday	AM PM	AM PM	AM PM	AM PM	AM PM
Monday	Tuesday	Wednesday	Thursday	Friday							
AM PM	AM PM	AM PM	AM PM	AM PM							

Please list 2 additional people that are authorized to pick up your child from the bus drop off point.
Photo identification will be required by bus staff.

1. _____ 2. _____

I have discussed the importance of bus safety and appropriate bus conduct with my camper. I understand that my camper may be removed from bussing transportation options should their behavior present an issue for bus staff and other campers. I agree to arrange appropriate persons for drop off/pickup at the appropriate times, and understand that the SPLASH BUS may leave in the morning should I be unable to arrive on time.

Parent/Guardian Signature _____	Date _____
Home Phone _____	Cell Phone _____
Emergency Contact Name _____	Emergency Contact # _____

**STAFF
USE
ONLY**

Date	Time of Arrival	Time of Pickup	Signature	LC BUS STAFF
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				